

Work Order ID 89383

89383

Page 1

August-24-12 1:44:56 PM

Item ID: D212-664-207 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Crosstube Low Standard Aft
 Start Date: 8/24/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/14/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 12/08/12 Tooling: _____ Date: _____
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____
 Run Start ***NR1***
 Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D212-664-247	Rev B (DEO)								
100	DOCUMENT CONTROL	0.00							
100									
DC	Memo	0.00							
Document Control	Photocopy bluefile and create labels as per PPP D212-664-207 CHG002								
110	Pick Kit	0.00							
110	Packaging								
Packaging	Memo	0.00							
Packaging									
120	BENDING MACHINE - CROSSTUBES	0.00							
120									
CNC Bend 2	Memo	0.00							
CNC Alpha 160 Bender	Bend tube as per Dwg D212-664-247 using CNC bender program and Folio FT								



idcok

MLJ 12-10-3

MO 12-9-18

MO/RM 12-9-18

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 89383

89383

Page 2

August-24-12 1:44:56 PM

Item ID: D212-664-207

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	QC15- Crosstube Dimensional Check	0.00							
130									
QC	Memo	0.00							
Quality Control									
140		0.00							
140									
Crosstubes									
Crosstubes	Memo	0.00							
Crosstubes	***** ENSURE PROPER JIG POSITIONING *****								
	1-Drill Rivet holes as per Dwg D212-664-247 using DT8972.***Use T-Pin***								
	2-Drill pilot holes in tube as per Dwg D212-664-247 using DT8550 and DT8551								
	3-Ream hole to finish size in tube as per Dwg D212-664-247								
	4-*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Debur & Inspect for surface damage. Repair damage within limits as per Dwg D212-664-247								
	5-Scribe part # and batch # using vibrating stylus as per Dwg D212-664-247								

DAS
15 / 12/01/12

JW

12-9-26

JW

12-9-26

DO
(BACK OF
PAGE 9)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/> <hr/>		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other <hr/> <hr/> <hr/>	

Work Order ID 89383

89383

Page 3

August-24-12 1:44:56 PM

Item ID: D212-664-207

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	QC5- Inspect part completeness to step on W/O	0.00							
150									
QC	Memo	0.00							
Quality Control	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
160		0.00							
160									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
	1- CLEAN CROSSTUBE WITH WASH'N WIPE								
180	Outsource process - NDT per QSI038 4.1	0.00							
180									
Outsource2	Memo	0.00							
Outsource process - NDT	*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***								
	Liquid Penetrant Inspection as per QSI 038								
	Issue P/O: 1805 LPI as per ASTM 1417								
	Level 2 Attach copy of NDT results to work order								

DA 15 17/02/26

AR 12-9-27

CL 12/09/27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misread
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Offset
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 89383***89383***

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Item ID: D212-664-207

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00

1

Customer:

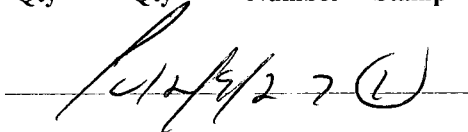
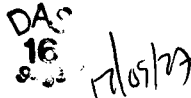
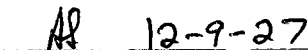
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190 *190* Packaging Packaging	Receive & Inspect for Damage & Mat'l Certs Packaging Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Ensure copy of NDT results attached to work order.	0.00 0.00							
200 *200* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Inspect for damage & ensure results are as per Dwg D212-664-207	0.00 0.00							
204 *204* HandFXtube Hand Finishing Crosstubes	Crosstubes Chemical Conversion Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** 1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN CROSSTUBE AND CUFF BEFORE CHEMICAL CONVERSION	0.00 0.00							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 89383

89383

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August-24-12 1:44:56 PM

Item ID: D212-664-207 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Crosstube Low Standard Aft
 Start Date: 8/24/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/14/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
206 *206* QC Quality Control	QC7-Inspect Chemical Conversion Coat Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***	0.00 0.00							
210 *210* Crosstubes Crosstubes	Crosstubes Memo *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** 1-Rivet and assemble Cuffs with T-Pin in the through bolt holes as per Dwg D212-664-247. with Sika flex in Between tube & Cuff A/R SIKAFLEX -241/-291 BATCH: <u>122443</u>	0.00 0.00							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

Work Order ID 89383***89383***

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Item ID: D212-664-207

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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215

QC5- Inspect part completeness to step on W/O

0.00

215

QC

Memo

0.00

Quality Control

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

Inspect cuff with T-Pin

DAS
05
12 09 29

220

Spray Painting per QSI005 4.2

0.00

220

SprayPaint

Memo

0.00

Spray Painting

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

1-Prime inside and outside crosstube as per QSI 005 4.2

2-Paint outside crosstube with White Imron as per QSI 005 4.2

PRIME:

Start Time: 6:00Fininsh Time: 7:00

PAINT:

Start Time: 1:00Finish Time: 2:00DAS
05
12 09 29

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 89383

89383

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Item ID: D212-664-207

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

230

QC14- Inspect Spray Paint

0.00

230

QC

Memo

0.00

Quality Control

Wrap in plastic bag to protect from scratches

0 12.10.01

240

Crosstubes

0.00

240

Crosstubes

Memo

0.00

Crosstubes

1- Assemble as per Dwg D212-664-247

1-Abrade mating surfaces of support and crosstube with 400 grit sandpaper, clean the area with 4105S wash 'n' wipe

2-Install supports with Proseal 890 per DSI9563 and QSI 015

A/R Proseal 890 Batch: 123103

3- Torque bolts as per dwg

1 DAS 05 12601

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

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89383

Item ID: D212-664-207

Revision ID:

Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12 **Start Qty:** 1.00

Required Date: 9/14/12 **Req'd Qty:** 1.00

Reference:

Approvals: _____ **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out-of-Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 89383

89383

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Item ID: D212-664-207 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Crosstube Low Standard Aft
 Start Date: 8/24/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/14/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start ***NR1***
 QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
270		0.00							
270	Packaging			103					12/10/11
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D212-664-207								
280	QC21- Final Inspection - Work Order Release	0.00							12/10/11
280									
QC	Memo	0.00							
Quality Control									

W12011

NCR: ☒ Yes / ☐ No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA *Ante* Date: 12/10/22QA Closed: *CK* Date: 12/14/22

Work Order: <u>89383</u>				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. <u>12-1664-207</u>				Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		Skid-tube <input type="checkbox"/> Machining <input checked="" type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>					
NCR No. <u>12-1916</u>						<i>Found @ Crosstube</i>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data				<i>Found when transfer drilling machined cuff D3660-1 to x-tube that the cuff was too short. Dim 0.438 is missing 0.412"</i>	<i>DAS 16 12/09/21</i>	<i>Scrap + Destroy. D3660-1 D 76983. + Repl B 87445</i>	<i>TW 12-9-21</i>	<i>DAS 16 12/10/22</i>	<i>DAS 16 12/09/21</i>		
Equip/Tooling											
Operator <input checked="" type="checkbox"/>											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY														
Landing Gear				General										
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Finish	<input type="checkbox"/> Finish
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Folio	<input type="checkbox"/> Folio	<input type="checkbox"/> Folio	<input type="checkbox"/> Folio	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Wave/Twist in Tube

Not machining scratch @ Haas + missed at the QC's on w/o. 76983

Picklist Print

Page 1

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Work Order ID: 89383

Parent Item: D212-664-207

Start Date: 8/24/12

Required Date: 9/14/12

Parent Item Name: Crosstube Low Standard Aft

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A New Issue 07.09.12 EC verified by: JLM
 IPP Rev:B ECN 1100p 08-01-11 DD verified by: EC
 IPP Rev:C ECN 1121 08-02-25 DD verified by: eC
 IPP Rev: D QC5 replaced by QC15 at step 5 KJ Verified by: ec

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D212-664-207TRNRevA Crosstube Turning Detail		Manufactured	No	89854		110	Each	0.0000	1	1		MO	12-9-18
D3660-1 CUFF		Manufactured	No			140	Each	20.0000	2	2			

Location Loc Qty Loc Code

LG 2
 80359 2
 ST477 10
 87445 10
 ST482 8
 53501 1
 76983 1
 88394 6

2 JW 12-9-21

1 JW 12-9-21

CR3212-4-06
 CHERRY RIVET

Purchased No

220 Each 796.0000

44 44

AB 12-9-28

Location Loc Qty Loc Code

ST329 503
 122378 503
 ST330 240
 120521 40
 122141 200
 ST331 53
 112492 18
 112794 8
 119717 27

44

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

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Page 2

Work Order ID: 89383

Parent Item: D212-664-207

Parent Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12

Required Date: 9/14/12

Start Qty: 1.00

Required Qty: 1.00

D3595-063-530
RUBBER CUSHION

Manufactured No

240 Each 162.0000

4 4

DAS 05 12 10 01

Location	Loc Qty	Loc Code
LG	50	
79932	13	
82656	37	
LG051	73	
87833	73	
MAT052	39	
63407	6	
67185	6	
70067	18	
72745	2	
75783	7	

D2940-1
Support

Manufactured No

240 Each 23.0000

2 2

DAS 05 12 10 01

Location	Loc Qty	Loc Code
LG052	23	
79118	2	
82657	1	
87921	20	

MS21920-28
Clamp(per MIL-DTL-8783C)

Purchased No

240 Each 78.0000

4 4

DAS 05 12 10 01

Location	Loc Qty	Loc Code
FG	5	
105884	5	
LG050	55	
118713	3	
120054	2	
122518	50	
LG051	18	
121440	8	
122204	10	

B# 122838

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Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

August-24-12 1:44:56 PM

Page 3

Work Order ID: 89383

Parent Item: D212-664-207

Parent Item Name: Crosstube Low Standard Aft

Start Date: 8/24/12

Required Date: 9/14/12

Start Qty: 1.00

Required Qty: 1.00

D3428-1
Placard

Manufactured No

255 Each 13.0000

1

1

9099B

Location

Loc Qty

Loc Code

ST042

13

83582

1

85228

12

MS21042L6

Purchased No

255 Each 869.0000

6

6

Location

Loc Qty

Loc Code

314

578

122441

578

ST300

291

117677

25

118384

3

118927

48

119075

15

120308

200

AN960JD616

NAS1149D0663J

Purchased No

255 Each 0.0000

18

18

Washer

AN6-41A

Purchased No

255 Each 89.0000

2

2

Bolt

Location

Loc Qty

Loc Code

ST340

50

122407

50

ST342

39

120423

9

121825

30

121825

Ph →

August-24-12 1:44:56 PM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

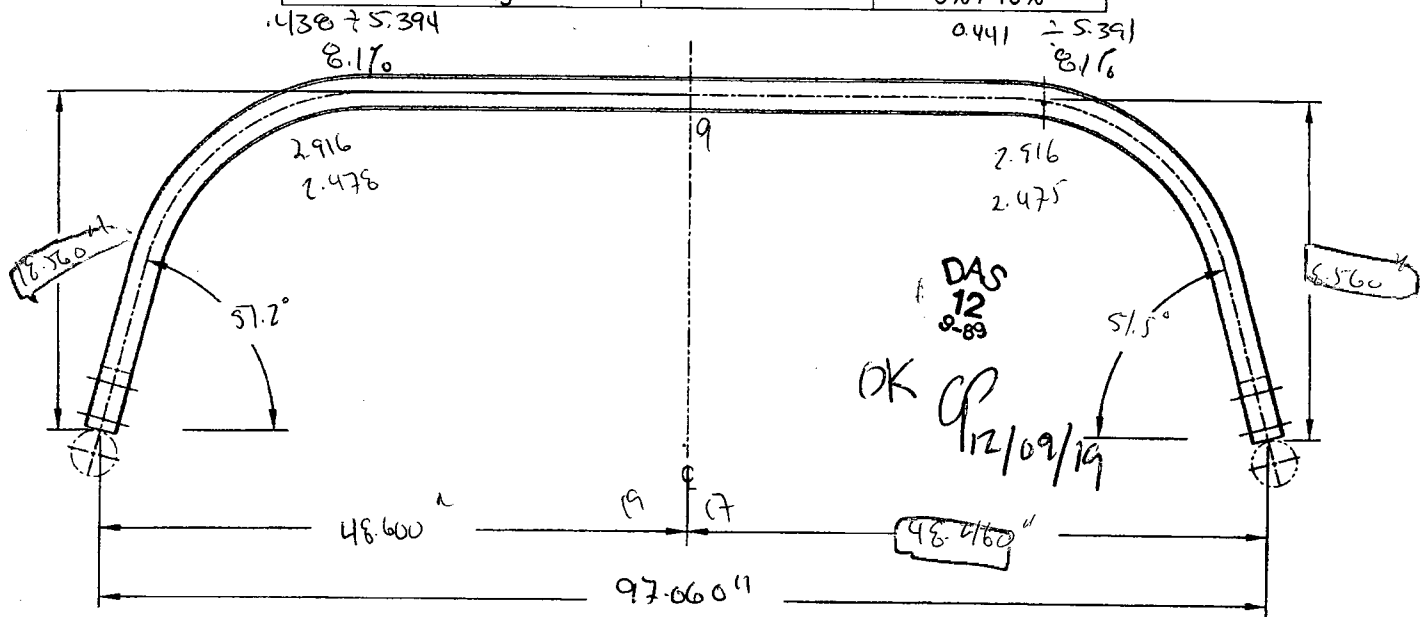
DQA: AK Date: 12/10/17QA Closed: CL Date: 12/10/17

Work Order: <u>89383</u> Part No. <u>D212-664-207</u> NCR No. <u>12-1917</u>				DISPOSITION Rework <input checked="" type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input checked="" type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data	12/10/17		4	Part missing from kit	 12/10/17	ADD ANG-408 B 120187 QTY 4	 12/10/17	 12/10/17	 12/10/17		
Equip/Tooling							update BOM + w/o	 12.10.17			
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input checked="" type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

DART AEROSPACE LTD		Work Order: 89383
Description: Crosstube Low Aft (205/212)		Part Number: D212-664-207
Inspection Dwg: D212-664-247	Rev: B	Page 1 of 1

Required Dimension	Min	Max
Height	18.16	18.42
1/2 Span	48.55	48.81
Angle	49	52
Total Span	97.1	97.62
Bending Passes	8	--
Crushing	--	6% / 10%



	Side A	middle	Side B
Bending Passes	19	9	17
Crushing	8.1%		8.1%
Comments			
Side A = 8.1% crushing @ 19 passes			
middle = 9 passes			
Side B = 8.1% crushing @ 17 passes			

QC15 Inspection	DAS 15 2-83
Date	12/09/18

Rev	Date	Change	Revised by	Approved
A	08.02.29	New Issue	KJ/JM	
B	10.04.01	Dwg Rev updated	KJ	
C	12.04.16	Added bending, crushing dimensions	KJ	CP

Item	Qty -247	Qty -247B	Part Number	Description
1	X		D212-664-247	CROSSTUBE ASSEMBLY (205/212 LOW AFT)
2		X	D212-664-247B	CROSSTUBE ASSEMBLY (214 LOW AFT)
3	1	1	D6008-132	CROSSTUBE
4	2	2	D2940-1	SUPPORT
5	4	4	D3595-063-530	RUBBER CUSHION
6	2	2	D3660-1	CUFF
7	4	4	MS21920-28	CLAMP (OR MS21920-30)
8	44	44	CR3212-4-06	RIVET (OR M7885/3-4-06)
9	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
10	A/R	A/R	SIKAFLEX-241/-291	SEALANT (OR PROSEAL 890 OR MIL-S-8802 CLASS B2 SEALANT)

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6008-132
FINISHED LENGTH = 128.288±0.020 (BEFORE BENDING/TRIMMING)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF
USING VIBRATING STYLUS.
- 7) WEIGHT: D212-664-247 = 36.6 lbs (PER IIN-D212-664)
D212-664-247B = 36.6 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) WHEN MACHINING TAPER, RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD
BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 8 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6%
BASED ON O.D., EXCEPT UP TO 10% IS ALLOWED IN AREA NOTED.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2940-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF
D2940-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER
INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-28 CLAMPS (OR -30) WITH D3595-063-530 RUBBER CUSHIONS TO SECURE THE D2940-1
SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE
SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS.
DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE
UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS
NOT BOTTOMED-OUT AFTER TORQUING.
- 16) INSTALL D3660-1 CUFF AFTER CHEMICAL CONVERSION COAT BUT BEFORE PAINT, WITH A LAYER OF
SIKAFLEX-241/-291 OR PROSEAL 890 OR MIL-S-8802 CLASS B2 SEALANT BETWEEN CUFF AND CROSSTUBE.
SEAL EDGE OF CUFF TO ENSURE NO GAPS.
- 17) TOUCH-UP HOLES WITH CHEMICAL CONVERSION COAT.

SHOP COPY

RETURN TO

ENGINEERING

UNCONTROLLED

SUBJECT TO APPROVAL

WITHOUT REVIEW

WORK ORDER

NO. 89383 MJS

12/08/29

DEO ATTACHED

000# 11-614

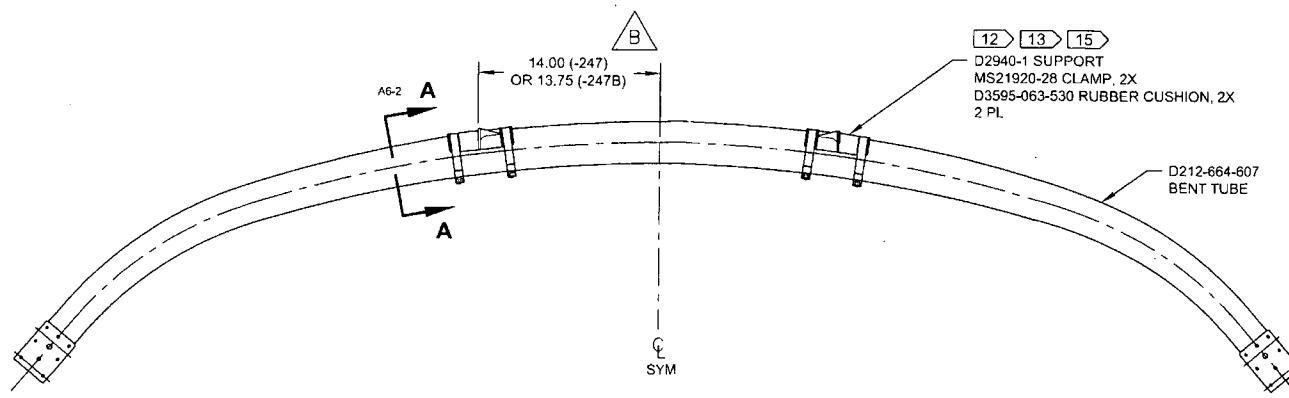
11.07.28

UNDER REVIEW

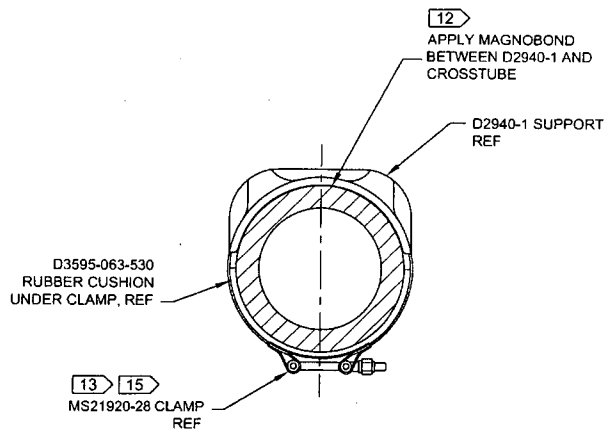
RELEASED
2009-10-29

B	REVISE GENERAL NOTES/PART LIST; UPDATE TO CURRENT STANDARDS; ADD -247B (ZN C4-2, D5-2)	RF	09.09.30
A	NEW ISSUE	CP	07.07.07
REV.	DESCRIPTION	BY	DATE
DESIGN	97	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	97	DRAWING NO.	REV. B
MFG. APPR.	18	D212-664-247	SHEET 1 OF 4
APPROVED	18	TITLE	SCALE
DE APPR.	18	CROSSTUBE (205/212 LOW AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2007 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

89383



D212-664-247/-247B
ASSEMBLY DETAIL



SECTION A-A D6-2
SCALE 4X

DEO ATTACHED

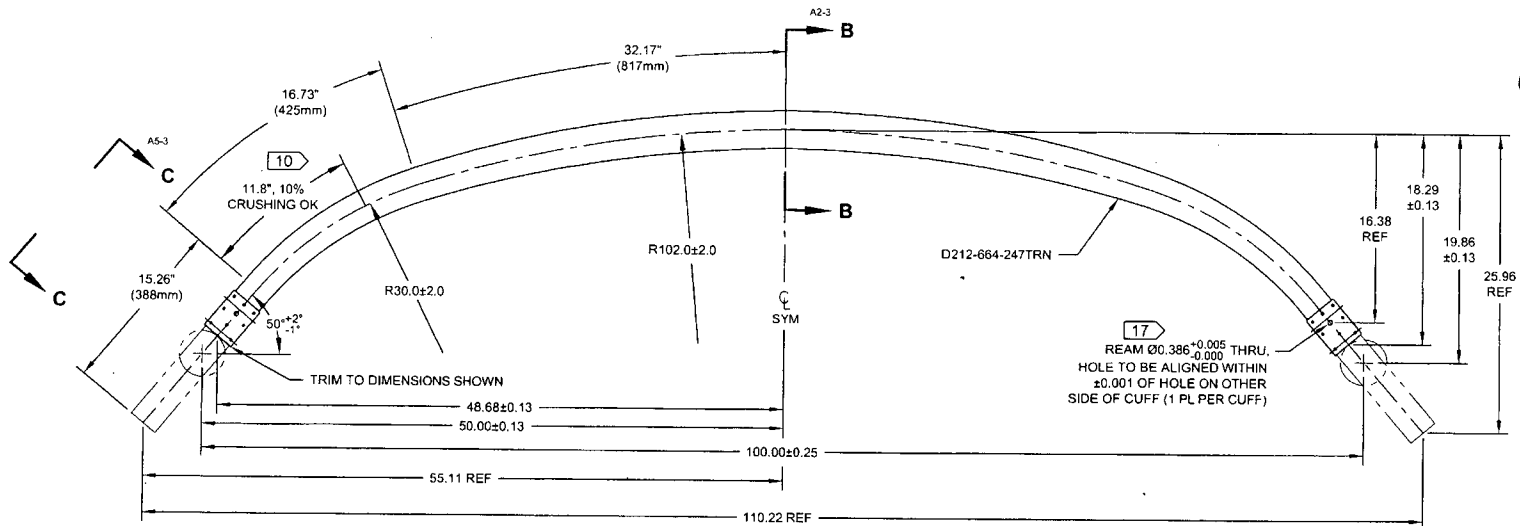
OCW # 11.648
11.07.28

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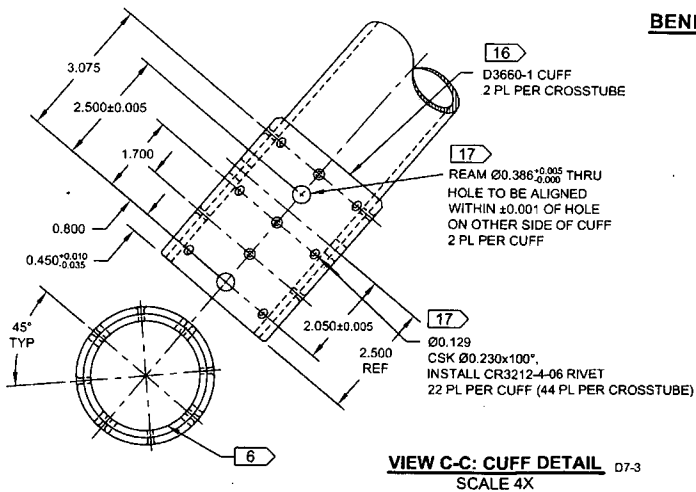
RELEASED
2009-10-29

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	RF	DRAWING NO.	REV. B
MFG. APPR.	RF	D212-664-247	SHEET 2 OF 4
APPROVED	RF	TITLE	SCALE
DE APPR.	RF	CROSSTUBE (205/212 LOW AFT)	NTS
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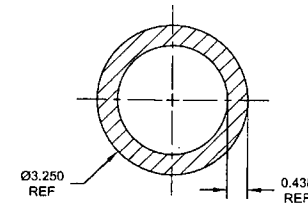
29383



**D212-664-607
BENDING AND DRILLING DETAIL**



VIEW C-C: CUFF DETAIL
SCALE 4X



SECTION B-B
SCALE 4X

DEO ATTACHED

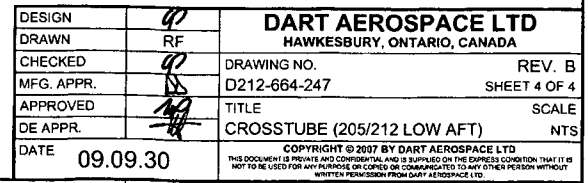
UNDER REVIEW

4/11/06/13

RELEASED
2009-10-29

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	RF	DRAWING NO.	REV. B
MFG. APPR.	RF	D212-664-247	SHEET 3 OF 4
APPROVED	RF	TITLE	SCALE
DE APPR.	RF	CROSSTUBE (205/212 LOW AFT)	NTS
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A



DRAWING NO. D212-664-247	TITLE CROSSTUBE ASS'Y (205 LOW AFT)	REV. B	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-247-B-1	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>q</i>	CHECKED <i>ASS</i>	MFG. APPR. <i>AB</i>	APPROVED <i>MD</i>		DE APPR. <i>MD</i>		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11/07/21		DATE 11.07.21		

PURPOSE:

REPLACE MAGNOBOND WITH PROSEAL.

CHANGE:

IS:

Item	Qty -247	Qty -247B	Part Number	Description
9	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

9	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
---	-----	-----	----------------	---

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) TO INSTALL D2940-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

- 12) INSTALL D2940-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2940-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED
2011-07-28
MD



ACUREN

LIQUID PENETRANT TEST REPORT

P- 10162

CLIENT DART AEROSPACE DATE SEPT/27/2012 PAGE 1 OF 1
ATTENTION LINDA CHANTACE ACUREN JOB NO. 188-12-00191 TIME AM ☒ PM ☐
ADDRESS 1270, ABERDEEN ST. POWO NO. AS ADDRESS
HAWKES BURY, ON WORK LOCATION AS ADDRESS
PROJECT PT- WET FLUORESCENT LIQUID PENETRANT INSPECTION ACCEPTANCE STD. ASTM E1654 REV./DATE
TEM(S) EXAMINED SEE BELOW

JOB DESCRIPTION PERFORMED A WET-FLUO LPI ON 100% OF THE EXTERNAL SURFACE OF ITEMS MENTIONED BELOW PROCEDURE NO. LT-002 REV./DATE 2007 TECHNIQUE NO. LT-002 REV./DATE 2007
PART NO. ALUMINUM / S/S MATERIAL ALUMINUM / S/S THICKNESS N/A
SCOPE PERFORMED A WET-FLUO LPI ON 100% OF THE EXTERNAL SURFACE OF ITEMS MENTIONED BELOW













































TEST DETAILS
METHOD ☒ FLUORESCENT ☐ VISIBLE ☐ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND MAGNAFLUOR BLACK LIGHT S/N 13798 OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT ZL-67 MINIMUM DWELL TIME 10 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER H₂O MINIMUM DRY TIME >10 MIN. OTHER
DEVELOPER SKD-32 MINIMUM DWELL TIME 10 MIN. LIGHT METER S/N 1098866 CAL DUE DATE 07/28/2012
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☐ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < - 4°C/ 20°F ☐ - 4°C/ 20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS- (<input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL)		ITEM	COMMENTS	ACCEPT	REJECT
1	CROSSTUBE W.O. ID	88404			
2		89254			
3		89268			
4		89269			
5		89382			
6		89383			
7		90580			
8	3X MOUNT W.O. ID	83609			
NO RELEVANT INDICATION WAS DETECTED AS PER APPLICABLE STANDARD AT THE TIME OF INSPECTION					
ITEM ID D212-664-201 AFT					
ITEM ID D212-664-201 AFT					
ITEM ID D212-664-101 FWD HIGH					
ITEM ID D212-664-101 FWD HIGH					
ITEM ID D212-664-202 AFT					
ITEM ID D212-664-207 AFT					
ITEM ID D212-664-101 FWD HIGH					
ITEM ID D3687-1					

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc's liability in respect of the services referred to herein exceed the amount paid for such services.
Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES
CLIENT REPRESENTATIVE Andy Sheldon PRINT Sheldon SIGNATURE
TECHNICIAN (SIGNATURE): [Signature] SIGNATURE
NAME (PRINT): VES DESROSIER 1ST TECHNICIAN
CGSB LEVEL 2 SNT LEVEL 2 CGSB LEVEL 2 SNT LEVEL 2
CGSB REG. No 3049 CGSB REG. No 3049

Status	Item ID	Rev	Name	Start Date	Quantity	UoM	Op Date	Seq	Crp	Cap	Quar	Mer	Ind	NEC	IES	Sort	Time	Offset	an	Ty	1	Per	Orch	to	Viore	Cde	Last	Mdd	Date
	AN6-40A		Bolt	1/1/2008	4.0...	Ea		255	0 %	0.0000						10	0	MRP							10/1...	12/5...			
	AN6-41A		Bolt	1/1/2008	2.0...	Ea	7/...	255	0 %	0.0000						11	0	MRP							9/20/...	12/5...			
	AN960JD616		Washer	1/1/2008	18....	Ea	7/...	255	0 %	0.0000						9	0	MRP							9/20/...	12/5...			
	CR3212-4-06		CHERRY RIVET	1/1/2008	44....	Ea	7/...	220	0 %	0.0000						3	0	MRP							9/20/...	12/5...			
	D212-664-207TRN		Crosstube Turning...	1/1/2008	1.0...	Ea	12...	110	0 %	0.0000						1	0	MRP							9/20/...	12/5...			
	D2940-1		Support	12/5/2009	2.0...	Ea	7/...	240	0 %	0.0000						5	0	MRP							9/20/...	12/5...			
	D3428-1		Placard	12/5/2009	1.0...	Ea	7/...	255	0 %	0.0000						7	0	MRP							9/20/...	12/5...			
	D3595-063-530		RUBBER CUSHION	12/5/2009	4.0...	Ea	7/...	240	0 %	0.0000						4	0	MRP							9/20/...	12/5...			
	D3660-1		CUFF	12/5/2009	2.0...	Ea	7/...	140	0 %	0.0000						2	0	MRP							9/20/...	12/5...			
	MS21042L6		Nut	1/1/2008	6.0...	Ea	7/...	255	0 %	0.0000						8	0	MRP							9/20/...	12/5...			
	MS21920-28		Clamp(per MIL-D...	1/1/2008	4.0...	Ea	7/...	240	0 %	0.0000						6	0	MRP							9/20/...	12/5...			